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7590

11/28/2006

Richard R. Michaud
The Michaud-Duffy Group, LLP
Suite 206
306 Industrial Park Road
Middletown, CT 06457



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Christina A. Engel	(Depositor's name)
<i>Christina A. Engel</i>	(Signature)
February 26, 2007	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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09/720,353

12/21/2000

Michael Nolte

6400-0011WOUS

1134

TITLE OF INVENTION: SIGNING AND SIGNATURE AUTHENTICATION OF MESSAGES

03/01/2007 EHAILE2 00000000 09720353

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. FEE DUE	TOTAL FEE(S) DUE	DATE PAID
nonprovisional	NO	\$1400	\$0	\$0	\$1400	02/28/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
POLTORAK, PIOTR	2134	380-278000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Michaud-Duffy
2 Group LLP
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Wincor Nixdorf International GmbH Paderborn, Germany

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 10

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- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 503342 (enclose an extra copy of this form).

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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Richard R. Michaud

Typed or printed name

Date February 26, 2007

Registration No. 40,088

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